

497 Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

RECEIVED

NAME OF FILER Rush Hill for Council 2014		Date of This Filing 9/25/14	Date Stamp 2014 SEP 25 PM 4	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 949-723-7202	I.D. NUMBER (if applicable) 1359628	Report No. 07	OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH	
STREET ADDRESS 115 Twenty Second St.		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Newport Beach	STATE CA	ZIP CODE 92663	No. of Pages 1	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
9/25/14	Davey's Locker Sportfishing Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,100.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
9/25/14	Newport Landing Sportfishing Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,100.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: _____

**Contributor Codes

IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee